Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

10/7/2014

Abby Raper
311 4th Street S.W.
Spencer, Ioea 51301

Dear Child Care Provider,

This letter is in regards to the 10/2/2014 compliance check of your Level B, Registered Child Developm
areas were out of compliance at the time of my visit:

110.5(2)d An individual file is maintained for each substitute and contains:

☐110.5(2)d Certification in infant and child first aid that includes mouth-to-mouth resuscitation. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR. *As we discussed on 10/2/14, Paula Raper your substitute, did not have the certificate for first aide/CPR. You reported she had taken the training but had not gotten her certificate. You agreed to not use Paula Raper as a substitute provider until she obtained the above certifications.* **Please mail me a copy of Pauls Raper's CPR/First Aid certificate when you return this letter.**

☐110.5(10)e The provider maintains a written record of the number of hours substitute care is provided, including the date and the name of the substitute. *As we discussed on 10/2/14, you have not been keeping a written record of the number of hours of substitute care including date and the name of the substitute. You agreed to start doing this in the future.*

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☒Based on the items out of compliance listed above, a recheck or follow up visit to your home is not necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.

Please sign and date below, and return this form in the provided envelope by: 11/24/2014

X_____ _____
Signature   Date

Please do not hesitate to contact me at DHS at 712-792-4391 if you have any questions regarding this letter.

Sincerely,

Linda Paulson
Social Worker II

Anne Matthai, Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 712-786-2001.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://dhs.iowa.gov/sites/default/files/CC_Professional_Development.pdf and you can sign up for training at http://ccmis.dhs.state.ia.us/trainingregistry/

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).